## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

28

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000061796 (4)

SEPTIC SOLUTIONS, INC.

2. Principal Place of Business

Suite, Apt #, etc.

City & State

SIGNATURE:

Zip

21

Principal Place of Business Mailing Address

2678 MCGREGOR BLVD
FT MYERS FL 33901 FT MYERS FL 33901

Country

FILED Jan 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

(941)337-5218

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

07/22/1996

65-0689633

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

g. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
VAN NETTA, WILLIAM D			81 Nar		
2678 MCGREGOR BLVD					
FT MYERS FL 33901			82 Stre	et Address (P.O. Box Number is Not Acceptable)	
FI MIERO FL 33901			83		
			84 City	85 Zip Code	
11 Pursuant to the provisions of Sections 607 0502 and 607 1509 Storido Statuto the ob-				FL S Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
12. OFFICERS AND DIRECTORS 13.			Agent signa		
TITLE	D DELETE	1.1 TIT	IF.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	VAN NETTA, WILLIAM D	1.2 NA			
STREET ADDRESS	2678 MCGREGOR BLVD				
CITY-SI-ZIP	FT MYERS FL	1.3 STREET ADDRESS		8	
TITLE	DELETE	2.1 TIT		Change Addition	
NAME		2.2 NA		- Addition 1	
STREET ADDRESS			re Eet addres		
CITY-ST-ZIP				5	
TITLE	DELETE	2. 4 CITY-ST-Z 3.1 TITLE		Change Addition	
NAME		3.2 NA		Citalige Change	
STREET ADDRESS			EET ADDRES		
CITY-ST-ZIP			KET ADDRES Y-ST-ZIP	8	
TITLE	DELETE	4.1 TITI		☐ Change ☐ Addition	
NAME	tal File.	4. 2 NA	•	Citalige Addition	
STREET ADDRESS			MC EET ADDRES		
CITY-ST-ZIP			CET ADURIES (-ST-ZIP		
TITLE	DELETE	5.1 TITI		Change Addition	
NAME		5.2 NAM	-	C. Grange C. Addition	
STREET ADDRESS			eet addres	e	
CITY-ST-ZIP					
TITLE	DELETE	6.1 TITL	-ST-ZIP F	Change Addition	
NAME		6.2 NAM		Sinarge Madition	
STREET ADDRESS			'L EET ADDRES		
CiTY-ST-ZiP				<b>'</b>	
14 I hereby o	ertify that the information supplied with this filing does not qualify for the	ne ever	-ST-ZIP notion st	ated in Section 119.07(3)(i). Florida Statutes 1 further certify that the information	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.					

Country